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25944 OLIFF & BER P.O. BOX 3208 ALEXANDRIA		8 2008 E	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
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APPLICATION NO. FILING DATE		FIRST NAMED INVENTO		OR ATTORNEY DOCKET NO.		UNEY DOCKET NO.	CONFIRMATION NO.	
10/658,810 TITLE OF INVENTION	09/10/2003 I: INFORMATION PRO	CESSING SYSTEM	Taro Terao	٠.	•	117127	2878	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	JE PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0		\$1740	10/14/2008	
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FEARER, MARK D 2143			709-203000	_				
CFR 1.363).  Change of corresp Address form PTO/S  "Fee Address" inc	lication (or "Fee Address 02 or more recent) attach	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI Fuji Xerox	less an assignee is ident th in 37 CFR 3.11. Com GNEE C Co., LTD.	A TO BE PRINTED ON tified below, no assignee pletion of this form is NO	data will appear on the Ta substitute for filing (B) RESIDENCE: (C) Tokyo, Ja	e patent. If an assign an assignment FC:15: ITY and STATEOUS pan	<b>₿₽</b> UNII	RY)	58819 has been filed for 1440.09 OP 380.00 OP	
4a. The following fee(s)  X Issue Fee	are submitted:	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  \[ \begin{align*} \tilde{\text{N}}\] A check is enclosed. CK\# 209335  \[ \begin{align*} \text{Payment by credit card. Form PTO-2038 is attached.}  \[ \begin{align*} \tilde{\text{N}}\] The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number \(\frac{15-0461}{15-0461}\) (enclose an extra copy of this form).						
O a. Applicant claim	atus (from status indicate ns SMALL ENTITY state and Publication Fee (if req records of the United Sta	us. See 37 CFR 1.27.	b. Applicant is no	longer claiming SMA	LL ENT	TITY status. See 37 CF		
Authorized Signature	faut 1	Silver		Date <u>August 28, 2008</u>				
Typed or printed nan	<sub>ne</sub> Warrett L. S	<del></del>	Registration No. 60,239					

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